

(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JUL 26 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

	and Pignatelli				
(Na	me of partnership, firm or co	orporation)			
One Capital	Plaza	Concor	d NH		03301
Business Address: (St		(Town/City)	(State)	(Zip Code)
603 226-26	00 (603)	226-2700	_{e-mail} d	gc@rathl	.aw.com
(603 226-26 (Telephone)		(Fax)			· · · · · · · · · · · · · · · · · · ·
	ransactions which are n nsactions occurring in the			ing to the fall	owing client:
	-	months prior to the	e reporting date relat	ive to the folio	owing onem.
	North Country Healt	hcare (formerly	North Country H	ospital Coa	_
	North Country Healt (Full Name of Client as it	hcare (formerly	North Country H	ospital Coa	_
OR ☐ All reportable tran	(Full Name of Člient as it sactions by the lobbyist (hcare (formerly tappears on the Lobb	North Country H yist Registration Form	ospital Coa	lition)
OR ☐ All reportable tran unrelated to any partice IV. Date of Report	(Full Name of Člient as it sactions by the lobbyist (hcare (formerly tappears on the Lobb including the lobby	North Country H yist Registration Form	ospital Coa) lobbying firm	lition)
OR ☐ All reportable tran unrelated to any partice IV. Date of Report	(Full Name of Člient as it sactions by the lobbyist (cular client. April 26, 2017	hcare (formerly tappears on the Lobb including the lobby n to 3/31/17	North Country Hyist Registration Form ist's family), or the July 26, 2017	lobbying firm X 06/30/17	lition)
OR All reportable tran unrelated to any particular of Report Reports cover: activity. There have been activity this box is checked,	(Full Name of Člient as it sactions by the lobbyist (cular client. April 26, 2017 wity from date of registration October 25, 2017	hcare (formerly tappears on the Lobb including the lobby n to 3/31/17	North Country H yist Registration Form ist's family), or the July 26, 2017 activity from 4/1/17 to January 31, 2 activity from 10/1/17 cansactions made	lobbying firm Sample Sample	listed below whice
OR All reportable tran unrelated to any particular of Report Reports cover: activity. There have been If this box is checked, Concord, NH 03301. VI. Check if additional activity.	(Full Name of Člient as it sactions by the lobbyist (cular client. April 26, 2017 vity from date of registration October 25, 2017 activity from 7/1/17 to 9/30 n no fees received and complete just this form a mal reports are attached	hcare (formerly appears on the Lobb including the lobby n to 3/31/17 9/17 I no reportable to the submit it to the submit it to the second control of the submit it to the second control of the secon	North Country H yist Registration Form ist's family), or the July 26, 2017 activity from 4/1/17 to January 31, 2 activity from 10/1/17 ransactions made Secretary of State 's	ospital Coa) lobbying firm (X) 0 6/30/17 018 10 12/31/17 since the la: Office, State I	st report. Nouse, Room 204,
OR All reportable tran unrelated to any particular par	(Full Name of Člient as it sactions by the lobbyist (cular client. April 26, 2017 October 25, 2017 activity from date of registration activity from 7/1/17 to 9/36 n no fees received and complete just this form a nal reports are attached wed fees or made expendi	hcare (formerly appears on the Lobb including the lobby n to 3/31/17 9/17 I no reportable to the submit it to the stand submit it to the stands.	North Country H yist Registration Form ist's family), or the July 26, 2017 activity from 4/1/17 to January 31, 2 activity from 10/1/17 cansactions made Secretary of State 's a	lobbying firm Society Society	st report. House, Room 204,
OR All reportable tran unrelated to any particular to any particular to. IV. Date of Report Reports cover: activular to. V. There have been activular to. VI. Check if additional If you have receivular to. If you have paid a Expense Reimbursem.	(Full Name of Člient as it sactions by the lobbyist (cular client. April 26, 2017 vity from date of registration October 25, 2017 activity from 7/1/17 to 9/3t n no fees received and complete just this form a complete just	hcare (formerly appears on the Lobby including the lobby note 3/31/17 9/17 I no reportable to and submit it to the stands are the second submit it to the second submit it it to the second submit it it it it it is second submit it is second submi	North Country H yist Registration Form ist's family), or the July 26, 2017 activity from 4/1/17 to January 31, 2 activity from 10/1/17 ransactions made Secretary of State 's a	ospital Coa cospital Coa cos	st report. Stouse, Room 204, es of Honorariums or